

| POSITION | NAME | ID NO. | DATE |
|----------------------------------|---------------|----------------------|------|
| FEES DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | 20 | 5/2 | |
| FORMALITY REVIEW | 1020 | 05/25/01 | |
| RESPONSE FORMALITY REVIEW | 1044 JC966 | 09/13/01 03/01/02 | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|------|
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| Claim | Date |
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| 56 | N |
| 57 | N |
| 58 | N |
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| 68 | N |
| 69 | N |
| 70 | N |
| 71 | N |
| 72 | ✓ |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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